

B6I (Official Form 6I) (12/07)

In re	Anastasia Sykes		Case No.	
		Debtor(s)		

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE				
Single	RELATIONSHIP(S): Child Child	AGE(S): 13 15			
Employment:	DEBTOR	•	SPOUSE		
Occupation	Secretary				
Name of Employer	Advoate Christ Hospital				
How long employed	8 years				
Address of Employer	4440 West 95th Street Oak Lawn, IL 60453				
	ge or projected monthly income at time case filed)		DEBTOR		SPOUSE
	y, and commissions (Prorate if not paid monthly)	\$ _	2,758.08	\$ _	N/A
2. Estimate monthly overtime		\$ _	0.00	\$ _	N/A
3. SUBTOTAL		\$_	2,758.08	\$_	N/A
4. LESS PAYROLL DEDUC			4-0		
a. Payroll taxes and soci	al security	\$ _	453.57	\$ _	N/A
b. Insurance		\$ _	208.50 0.00	\$ -	N/A N/A
c. Union duesd. Other (Specify)	See Detailed Income Attachment	\$ -	15.23	\$ -	N/A
			677.30	<u> </u>	
5. SUBTOTAL OF PAYROL	L DEDUCTIONS	<u> </u>	011.00	J	
6. TOTAL NET MONTHLY	TAKE HOME PAY	\$_	2,080.78	\$_	N/A
7. Regular income from opera	tion of business or profession or farm (Attach detailed stater	nent) \$ _	0.00	\$	N/A
8. Income from real property		\$_	0.00	\$ _	N/A
9. Interest and dividends		\$_	0.00	\$ _	N/A
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above			0.00	\$_	N/A
11. Social security or governm (Specify):	nent assistance	\$	0.00	\$	N/A
		\$	0.00	\$	N/A
12. Pension or retirement inco	ome	\$	0.00	\$	N/A
13. Other monthly income (Specify): Father C	ontribution to Household	¢	150.00	¢	N/A
(Specify).	ontribution to mousehold	\$	0.00	\$ _	N/A
14. SUBTOTAL OF LINES 7	THROUGH 13	\$_	150.00	\$_	N/A
	INCOME (Add amounts shown on lines 6 and 14)	\$_	2,230.78	\$_	N/A
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)			\$	2,230	
10. COMBINED AVERAGE		~,			

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Detailed Income Attachment

Other Payroll Deductions:

OPT ADD	\$ 7.50	\$ N/A
OPT Life C	\$ 0.80	\$ N/A
OPT LF EE	\$ 6.93	\$ N/A
Total Other Payroll Deductions	\$ 15.23	\$ N/A

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B6J (Official Form 6J) (12/07)

In re	Anastasia Sykes		Case No.	09-16205
		Debtor(s)	_	

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) - $\mathbf{AMENDED}$

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22	2C.	
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	850.00
a. Are real estate taxes included? Yes No _X_		
b. Is property insurance included? Yes No _X_		
2. Utilities: a. Electricity and heating fuel	\$	150.00
b. Water and sewer	\$	0.00
c. Telephone	\$	101.00
d. Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	0.00 450.00
4. Food5. Clothing	\$	50.00
6. Laundry and dry cleaning	\$	50.00
7. Medical and dental expenses	\$ 	20.00
8. Transportation (not including car payments)	\$	100.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	100.00
e. Other 12. Taxes (not deducted from wages or included in home mortgage payments)	\$	0.00
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other	э	0.00
17. Other Other	Ф •	0.00
Other	Ψ	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	1,871.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	_	
20. STATEMENT OF MONTHLY NET INCOME	¢.	2 220 70
a. Average monthly income from Line 15 of Schedule I	\$	2,230.78 1,871.00
b. Average monthly expenses from Line 18 abovec. Monthly net income (a. minus b.)	Φ	359.78
c. Monday not moonic (a. minus 0.)	Ψ	333.70